

---

**Final Inspection / Project Completion**(If Project has more than One Phase, Please Submit a Separate Form for Each Phase.)

---

<b>Date:</b>	
<b>To:</b>	Labor Standards Officer
	Indiana Office of Rural Affairs
	Grants Management
	One North Capitol, Suite 700
	Indianapolis, IN 46204-2288
<b>From:</b>	
<b>Grantee:</b>	
<b>Grant Number:</b>	

**Project Information**

<b>1. Project / Phase:</b>	
<b>2. Name of Contractor:</b>	
<b>3. Completion of Construction Date:</b>	
<b>4. Final Inspection Date:</b>	